Further, International Guidelines on HIV/AIDS and human rights urge that States should ensure that Government and the private sector develop codes of conduct regarding HIV/AIDS issues that translate human rights principles into codes of professional responsibility and practice, with accompanying mechanisms to implement and enforce these codes.

(c) and (d) The Indian Medical Council (Professional Conduct, Etiquette and Etfiics) Regulations, 2002, clearly states that no physician shall arbitrarily refuse treatment to a patient. It also makes provision for imposition of punishment to medical professionals who violate these Regulations.

The Government has also approved the National AIDS Prevention and Control Policy, 2002 which states that the Government will review and reform criminal laws and correctional systems to ensure that they are consistent with the international human rights obligations and are not misused in the context of HIV/AIDS. As envisaged in the Policy, Government will strengthen anti-discrimination and other protective laws that protect vulnerable groups, people living with HIV/AIDS from discrimination in both the public and private sectors. Government provides anti-retroviral drugs for post-exposure prophylaxis in public sector hospitals treating HIV/AIDS patients, in order to address the concerns of healthcare providers to occupational exposure to HIV infection.

The Government has initiated intensive advocacy, sensitisation and training programmes for the medical and paramedical staff so that people living with HIV/AIDS are not discriminated, stigmatised or denied services. The thrust of the ongoing multimedia campaign "Jeeyo aur Jeene do" focuses on stigma and discrimination related to HIV positive people, and aims towards provision of just and fair treatment to them in all spheres, especially in healthcare settings.

(e) The impact of these awareness programmes has been encouraging.

Shortage of medicine in Centrai Government Hospitals

†1114. PROF. M.M. AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether all hospitals run by Central Government in Delhi are facing shortage of medicine continuously;

†Original notice of the question was received in Hindi.

(b) if so, the details thereof;

(c) if not, the reasons for not distributing free medicines to the persons from poor and weaker sections in the said Government hospitals thereby forcing them to purchase such medicines from market; and

(d) the orders/directions issued by Government to all the Government hospitals for distribution of free medicines to the poor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (d) There is no shortage of medicines in Central Government Hospitals in Delhi. Medicines, as per the hospital formulary, are distributed to the patients free of cost as per the existing policy. In case of non-availability of essential and life saving medicines, the same are also procured and supplied to the poor patients.

Artificial Limb

1115. SHRI BIRABHADRA SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of applications received in the Ministry during the period from 1 st January, 2002 to 31 st January, 2003 for conveying sanction for artificial limb;

(b) the cases where sanction has been conveyed to their employer;

(c) the details of applicants whose applications are pending in CGHS; and

(d) by when the sanction is likely to be conveyed in all such pending applications?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Five.

(b) Three.

(c) Two.

(d) In one case, the Expert Committee has not approved imported artifk:ial limb requested by the beneficiary and has instead suggested